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Introduction: The purpose of this first phase of longitudinal research is to examine the early longitudinal course of PTSD in military personnel after their return from Iraq or Afghanistan, and to test hypotheses regarding risk factors for chronic PTSD. The study aims to recruit and comprehensively assess 300 National Guard and Reserve troops recently returning from deployment, and to obtain follow-up assessments of symptomatic course, functional outcomes, treatment utilization, and ongoing social support and life stress at six and twelve months post return.

Body: During the first three months of the funding period staff were hired, the assessment battery was finalized, and interviewers were trained to reliably administer the key interviews (Clinician Administered PTSD Survey – CAPS, Structured Diagnostic Interview for DSM-IV Disorders – SCID). Protocols were submitted to local IRBs (Brown University and the Providence Veterans Affairs Medical Center), and to the Human Research Protections Office, USAMRMC. Approval to begin recruitment was granted by the USAMRMC HRPO in mid December of 2006, and recruitment for the study began.

Eighty three subjects have agreed to participate, signed informed consent, and completed baseline interviews (Task 1—in progress). Our window for recruitment was approximately 6 months following return from deployment. For subjects who had been back 6 months at the time of recruitment, we were able to complete baseline and 6 month interviews at the same point. Otherwise, subjects receive a separate interview at 6 months. We now have complete 6 month data for 78 Subjects (Task 2—in progress), and have completed fourteen 12 month interviews (Task 2). The response to the study has been excellent in terms of command support (willingness to allow us to speak to the soldiers to present the study) and in terms of the interest and response among soldiers. Recruitment has taken place primarily during redeployment debriefings held by the National Guard and Reserves.

Several local National Guard and Reserve units with large numbers of troops are scheduled to return in early fall, and we anticipate sizeable recruitment for the study during the upcoming fall and winter months.

Clinical editing of the data is underway. Programming for data entry has been completed, and data are now being entered for the baseline interviews. Data processing includes further computer based verification and editing. (Task 3 a.)

Given the early phase of the data collection and processing, data analyses have not yet been conducted. Thus, there are no scientific results or findings at this point to report.

Reviewers of the proposal for the current study strongly suggested adding biological measures as risk factors. This was not possible within the existing budget. The P.I. approached an investigator (Dr. Audrey Tyrka) with the relevant expertise, and Dr. Tyrka submitted a proposal to the USAMRMC for an add-on study to collect data for genetic

and stress hormone (cortisol) factors as risk factors. This study has been funded and is now underway. Forty-one subjects (of 44 invited) have participated in the add-on study to date.

Key Research Accomplishments:

- Human Subjects Approval
- Ongoing subject recruitment
- Completion of 83 baseline interviews
- Completion of 78 6 month follow-up interviews
- Completion of 14 12 month follow-up interviews
- Collaboration resulting in funding for add-on study of biomarkers as risk factors

Reportable Outcomes:

Data not yet analyzed; no reportable scientific findings to date from this study. Funding received for add-on study (biomarkers of risk)
Related publications and presentations by P.I. during period of report:

- Schnurr PP, Friedman MJ, Engel CC, Foa EB, Shea MT, Chow BK, Resick PA, Thurston V, Orsillo SM, Haug R, Turner C, Bernardy N. Cognitive Behavioral Therapy for Posttraumatic Stress Disorder in Women. A Randomized Controlled Trial.

 <u>Journal of the American Medical Association</u>. 2007; 297:820-830.
- Shea MT, McDevitt-Murphy MM, Ready D, Schnurr P. Group Therapy. In Foa EB, et al. (Eds.) Effective Treatments for PTSD: Practice Guidelines from the International Society for the Study of Traumatic Stress. NY, NY: Guilford Press, in press.
- Shea MT, Lambert J, Howard J, Davis N. Implementation of Present-Centered Therapy in the CSP-494. Presentation at the International Society for the Study of Traumatic Stress, November, 2006.

Conclusion: The study is receiving a favorable response and recruitment is going well.